

BP-A0148  
JUNE 10

## INMATE REQUEST TO STAFF CDPRM

U.S. DEPARTMENT OF JUSTICE

FEDERAL BUREAU OF PRISONS

TO: (Name and Title of Staff Member) <b>CASE MANAGER Mr Sprout</b>	DATE: <b>1/22/2021</b>
FROM: <b>Charles B. Parke</b>	REGISTER NO. <b>10211-046</b>
WORK ASSIGNMENT: <b>MEDICAL CARE #4</b>	UNIT: <b>K04-009</b>

SUBJECT: (Briefly state your question or concern and the solution you are requesting. Continue on back, if necessary. Your failure to be specific may result in no action being taken. If necessary, you will be interviewed in order to successfully respond to your request.)

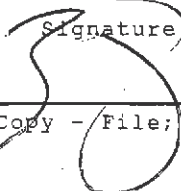
Why does the Institution or Warden have you waste all the time and paperwork, have my Supervised Release Officer OK all of the Release to just deny it anyways? Who is the RRM's Office and I need their Reason for denial after all the paperwork was completed? This is quite a waste to not submit my paperwork the first time then consume all these Offices (critical/valuable) time, let alone Inmates Families (Inmate thinking they are going home not once but twice for me. I would also like you to Resubmit my Plan because you even said, "This was wrong." And send me a BP-9 to file to the Warden again to Sir with the answer from RRM to file against. Thank You

Respectfully  
Charles B Parke  
CHARLES BERNARD PARKE

(Do not write below this line)

## DISPOSITION:

Your denial for home confinement was 12/30/2020, per RRM's decision.

Signature Staff Member 	Date <b>1/26/2021</b>
Record Copy - File; Copy - Inmate	
PDF	Prescribed by P5511

This form replaces BP-148.070 dated Oct 86 and BP-S148.070 APR 94

*John Records*

A0148

INMATE REQUEST TO STAFF CDFRM

HSLC 10

U.S. DEPARTMENT OF JUSTICE

FEDERAL BUREAU OF PRISONS

TO: (Name and Title of Staff Member) <i>CASE MANAGER MR. SPRAWL</i>	DATE: <i>10/27/2020</i>
FROM: <i>Charles B. Parke</i>	REGISTER NO: <i>10211-046</i>
WORK ASSIGNMENT: <i>Medical Care</i>	UNIT: <i>K 04-009</i>

SUBJECT: (Briefly state your question or concern and the solution you are requesting. Continue on back, if necessary. Your failure to be specific may result in no action being taken. If necessary, you will be interviewed in order to successfully respond to your request.

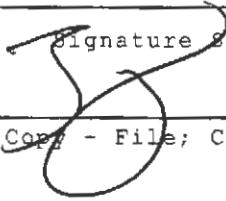
*SIR, I know you said, "to be patient concerning my Home Confinement that the Committee would contact me but I haven't heard nothing so I was thinking I should touch bases with you on it? If maybe you heard something? I appreciate your time sir. Thank You*

*Respectfully,  
Charles B. Parke  
Charles Bernard Parke*

(Do not write below this line)

DISPOSITION:

*Waiting to hear back from probation. Once that is complete, your home confinement packet can continue to be routed here at the institution.*

Signature Staff Member 	Date <i>10/28/2020</i>
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Record Copy - File; Copy - Inmate

PDF

Prescribed by N551/

This form replaces BP-148.070 dated Oct 86 and BP-S148.070 APR 94

## MALE PATTERN RISK SCORING

Register Number:		10211-046	Date:		9/23/2020
Inmate Name:		PARKE			
MALE RISK ITEM SCORING	CATEGORY	GENERAL SCORE	Enter Score	VIOLENT SCORE	Enter Score
1. Current Age	> 60	0	7	0	4
51-60	51-60	7		4	
Click on gray dropdown box to select, then click on dropdown arrow	41-50	14		8	
	30-40	21		12	
	26-29	28		16	
	< 26	35		20	
2. Walsh w/Conviction	No	0	0	0	0
No	Yes	1	0	0	0
3. Violent Offense (PATTERN)	No	0	0	0	0
No	Yes	5	0	5	0
4. Criminal History Points	0 - 1 Points	0	24	0	12
7 - 9 Points	2 - 3 Points	8		4	
	4 - 6 Points	16		8	
	7 - 9 Points	24		12	
	10 - 12 Points	32		16	
	> 12 Points	40		20	
5. History of Escapes	None	0	0	0	0
None	> 10 Years Minor	2		1	
	5 - 10 Years Minor	4		2	
	< 5 Years Minor/Any Serious	6		3	
6. History of Violence	None	0	0	0	0
None	> 10 Years Minor	1		1	
	> 15 Years Serious	2		2	
	5 - 10 Years Minor	3		3	
	10 - 15 Years Serious	4		4	
	< 5 Years Minor	5		5	
	5 - 10 Years Serious	6		6	
	< 5 Years Serious	7		7	
7. Education Score	Not Enrolled	0	-4	0	-2
HS Degree / GED	Enrolled in GED	-2		-1	
	HS Degree / GED	-4		-2	
8. Drug Program Status	No DAP Completed	0	-9	0	-3
No Need	NRDAP Complete	-3		-1	
	RDAP Complete	-6		-2	
	No Need	-9		-3	
9. All Incident Reports (120 months)	0	0	3	0	3
> 2	1	1		1	
	2	2		2	
	> 2	3		3	
10. Serious Incident Reports (120 months)	0	0	6	0	6
> 2	1	2		2	
	2	4		4	
	> 2	6		6	
11. Time Since Last Incident Report	12+ months or no incidents	0	0	0	0
12+ months or no incidents	7-12 months	2		1	
	3-6 months	4		2	
	< 3	6		3	
12. Time Since Last Serious Incident Report	12+ months or no incidents	0	0	0	0
12+ months or no incidents	7-12 months	1		2	
	3-6 months	2		4	
	< 3	3		6	
13. FRP Refuse	NO	0	0	0	0
NO	YES	1		1	
14. Programs Completed	0	0	-4	0	-2
2 - 3	1	-2		-1	
	2 - 3	-4		-2	
	4 - 10	-6		-3	
	> 10	-8		-4	
15. Work Programs	0 Programs	0	-2	0	-2
> 1 Program	1 Program	-1		-1	
	> 1 Program	-2		-2	
Total Score (Sum of Columns)		General:	21	Violent:	16
General/Violent Risk Levels		General:	Low	Violent:	Low
OVERALL MALE PATTERN RISK LEVEL			Low		



TRMGH 606.00 \* MALE CUSTODY CLASSIFICATION FORM \* 08-30-2020  
PAGE 001 OF 001 14:29:36

## (A) IDENTIFYING DATA

REG NO.: 10211-046 FORM DATE: 04-15-2020 ORG: TRM  
NAME: PARKE, CHARLES BERNARD

MGTV: NONE

PUB SFTY: NONE

MVED:

## (B) BASE SCORING

DETAINER: (0) NONE SEVERITY: (1) LOW MOD  
MOS REL.: 88 CRIM HIST SCORE: (06) 8 POINTS  
ESCAPES: (0) NONE VIOLENCE: (5) < 5 YRS MINOR  
VOL SURR: (0) N/A AGE CATEGORY: (2) 36 THROUGH 54  
EDUC LEV: (0) VERFD HS DEGREE/GED DRUG/ALC ABUSE: (0) NEVER/>5 YEARS

## (C) CUSTODY SCORING

TIME SERVED: (4) 26-75% PROG PARTICIPAT: (0) POOR  
LIVING SKILLS: (1) AVERAGE TYPE DISCIP RPT: (2A) 1 HIGH  
FREQ DISCIP RPT: (3) NONE FAMILY/COMMUN: (4) GOOD

## --- LEVEL AND CUSTODY SUMMARY ---

BASE CUST	VARIANCE	SEC TOTAL	SCORED LEV	MGMT	SEC LEVEL	CUSTODY	CONSIDER
+14	+14	0	+14	LOW	N/A	IN	SAME

G0005

TRANSACTION SUCCESSFULLY COMPLETED - CONTINUE PROCESSING IF DESIRED

BP-A0548  
JUN 10HOME CONFINEMENT AND COMMUNITY CONTROL  
AGREEMENTU.S. DEPARTMENT OF JUSTICE  
FEDERAL BUREAU OF PRISONS

I, PARKE, CHARLES BERNARD

10211-046

Name

Register Number

hereby agree to abide by the following Conditions related to my legal participation on home confinement.

I understand that my participation on home confinement will be an alternative to placement in a Community Corrections Center for no more than the last six (6) months or 10% of my sentence, whichever is less. I am aware that I will legally remain in the custody of the Bureau of Prisons and/or the U.S. Attorney General and that failure to remain at the required locations may result in disciplinary action and/or prosecution for escape.

I agree to report to my assigned probation officer or the contractor's facility immediately upon reaching my release destination.

I understand that if I decline to participate in the recommended home confinement program I may face administrative reassignment out of the community corrections program.

I agree that during the home confinement period, I will remain at my place of residence, except for employment, unless I am given permission to do otherwise. I also understand that I will be required to pay the costs of the program based on my ability to pay.

I also agree to maintain a telephone at my place of residence without "call forwarding", a modem, "Caller ID" or portable cordless telephones for this period.

I also agree that, if my confinement is to be electronically monitored, I will wear any electronic monitoring device required, following procedures specified and will not have "call forwarding" on my telephone.

Inmate's Name

PARKE, CHARLES BERNARD

*Charles B. Parke*

Date

10/05/2020

Staff Witness (Printed Name and Signature)

Z. Sproul

*[Signature]*

Facility

TERMINAL ISLAND FCI

*Copied Legal Records*

BP-S148.055 INMATE REQUEST TO STAFF CDERM

SEP 98

U.S. DEPARTMENT OF JUSTICE

FEDERAL BUREAU OF PRISONS

TO: (Name and Title of Staff Member) <i>CASE MANAGEMENT MS. NIEL A-UNIT</i>	DATE: <i>4/28/2020</i>
FROM: <i>Charles B. Parke</i>	REGISTER NO.: <i>10211-046</i>
WORK ASSIGNMENT: <i>Medical</i>	UNIT: <i>K-UNIT</i>

SUBJECT: (Briefly state your question or concern and the solution you are requesting. Continue on back, if necessary. Your failure to be specific may result in no action being taken. If necessary, you will be interviewed in order to successfully respond to your request.)

*MIA'm I sent you to Cop Outs Requesting confirmation for Emergency Release Inmate Request to Home Confinement, CARES ACT HR 748 Also sent to Mr. Spru and Mr. Skrells even handed A.W. Pr. to a copy AND CANNOT get an answer from none of ya's? MAY I get an answer from you please you said, You don't sugar coat nothing. I appreciate your time in this crisis. Thank You MIA'm*

*Respectfully*

*Charles B Parke*

*Charles Bernard Parke*

*"All Rights Reserved"*

(Do not write below this line)

DISPOSITION:

*you will be attested when deemed necessary and upon eligibility. please be patient*

Signature Staff Member

Date

*[Signature]* *4/28/20*

**Individualized Needs Plan - Program Review (Inmate Copy)**

SEQUENCE: 01572974

Dept. of Justice / Federal Bureau of Prisons

Team Date: 11-20-2020

Plan is for inmate: PARKE, CHARLES BERNARD 10211-046

Facility: TRM TERMINAL ISLAND FCI  
 Name: PARKE, CHARLES BERNARD  
 Register No.: 10211-046  
 Age: 52  
 Date of Birth: 04-25-1968

Proj. Rel. Date: 08-16-2027  
 Proj. Rel. Mthd: GCT REL  
 DNA Status: RCH01883 / 11-27-2009

**Detainers**

Detaining Agency	Remarks
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NO DETAINER

**Current Work Assignments**

Fac	Assignment	Description	Start
TRM	A&O COMP	A&O COMPLETE	01-13-2020

**Current Education Information**

Fac	Assignment	Description	Start
TRM	ESL HAS	ENGLISH PROFICIENT	12-02-2009
TRM	GED HAS	COMPLETED GED OR HS DIPLOMA	12-02-2009

**Education Courses**

SubFac	Action	Description	Start	Stop
SPG CAD	C	COMMERCIAL DRIVERS LICENSE ACE	02-12-2018	02-22-2018
SPG CAD	C	INTERLIBRARY LOAN CLASS	03-09-2017	03-10-2017
SPG CAD	C	RPP#2 VOC TRNG AUTO ENGINE	12-18-2015	09-30-2016
SPG CAD	C	RPP#2 ADV SMALL GAS ENGINE	12-22-2015	09-29-2016
SPG CAD	C	VT-SMALL ENGINE REPAIR	12-03-2015	02-18-2016
SPG CAD	C	BEGINNING PINOCHLE	11-09-2015	12-30-2015
SPG CAD	C	REENTRY SEMINAR TOPIC VARIES	09-16-2015	09-16-2015
RCH MS	C	JOB FAIR INFORMATION	10-29-2014	10-29-2014
RCH MS	C	BEADING	01-09-2010	03-09-2010
RCH CAD	C	PG CHARIS	02-12-2010	02-15-2010
RCH CAD	W	TYPING III - 9:30AM	01-14-2010	02-11-2010

**Discipline History (Last 6 months)**

Hearing Date	Prohibited Acts
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\*\* NO INCIDENT REPORTS FOUND IN LAST 6 MONTHS \*\*

**Current Care Assignments**

Assignment	Description	Start
CARE1-MH	CARE1-MENTAL HEALTH	09-08-2010
CARE3	UNSTABLE, COMPLEX CHRONIC CARE	04-01-2015

**Current Medical Duty Status Assignments**

Assignment	Description	Start
C19-RCVRD	COVID-19 RECOVERED	05-18-2020
LOWER BUNK	LOWER BUNK REQUIRED	04-26-2018
NO F/S	NO FOOD SERVICE WORK	04-26-2018
NO PAPER	NO PAPER MEDICAL RECORD	06-01-2015
REG DUTY	NO MEDICAL RESTR-REGULAR DUTY	10-22-2018
SOFT SHOES	SOFT SHOES ONLY	04-26-2018

**Current Drug Assignments**

Assignment	Description	Start
DAP NO INT	DRUG ABUSE PROGRAM NO INTEREST	08-03-2015
ED COMP	DRUG EDUCATION COMPLETE	03-10-2011

**FRP Details**

Most Recent Payment Plan
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**Individualized Needs Plan - Program Review (Inmate Copy)**

SEQUENCE: 01572974

Dept. of Justice / Federal Bureau of Prisons

Team Date: 11-20-2020

Plan is for inmate: PARKE, CHARLES BERNARD 10211-046

**Most Recent Payment Plan**FRP Assignment: **COMPLT** **FINANC RESP-COMPLETED** **Start: 12-07-2010**Inmate Decision: **AGREED** **\$25.00** Frequency: **QUARTERLY**Payments past 6 months: **\$0.00** Obligation Balance: **\$0.00****Financial Obligations**

No.	Type	Amount	Balance	Payable	Status
1	ASSMT	\$100.00	\$0.00	IMMEDIATE	COMPLETEDZ
** NO ADJUSTMENTS MADE IN LAST 6 MONTHS **					

**Payment Details**Trust Fund Deposits - Past 6 months: **\$338.00**Payments commensurate ? **N/A**

New Payment Plan:

**\*\* No data \*\*****Progress since last review**

Since last team inmate Parke has not been able to program since March 27th, when all institutional program stopped, due to the COVID-19 pandemic lockdown.

Risk Pattern: **LOW RISK RECIDIVISM LEVEL**Currently A&O **COMPLETE**.

The unit team recommends that you enroll in some form of vocational training class and ACE classes by next team.

FRP is completed.

**Next Program Review Goals**

Once institutional programming resumes... Continue to participate in institutional programs.

The unit team recommends to enroll in at least one self help session through the PSYCHOLOGY or RELIGIOUS SERVICES departments as needed.

Enroll in and complete at least two ACE class and any two of the RPP core courses that are offered during this period; RPP C1-C6, by next team 05/2021.

Continue to maintain clear conduct with no Incident Reports (IR) throughout your next team.

**Long Term Goals**

Continue to participate in at least one self help session through the PSYCHOLOGY or RELIGIOUS SERVICES departments as needed through the next eighteen (18) months.

Enroll in and complete at least one ACE class, any two RPP core courses (C1-C6) that are offered during this period; and a vocational course that interest you by next team 11/2021.

Continue to maintain clear conduct with no Incident Reports (IR) through the next eighteen (18) months.

**RRC/HC Placement**

No.

null.

Consideration has been given for Five Factor Review (Second Chance Act):

- Facility Resources
- Offense
- Prisoner
- Court Statement
- Sentencing Commission

**Comments**

I/M stated Social Security card and birth certificate are maintained in a safe location at home and declined to submit for filing in the Central File.

RRC/2nd Chance Act review closer to release.

Inmate is currently being reviewed for home confinement (HC) under the CARES ACT.



July 8, 2020

Central Office,

I send this single copy of this Administrative Request for Remedy for Compassionate Release and/or Inmate Request for Release to Emergency Home- Confinement, CARES Act HR 748 because Inmate confined to housing unit's Lock-down with NO access to South Yard Education Building printer that would usually be normal for Inmates to make copies for BOP's Administrative Remedy Procedures or Filing to the Courts.

Task that Central Office look on the BOP's Computer database for the previous Filed Administrative Remedies to Warden Panke 3/29/2020 the Bureau of Prisons Regional Office 4/9/2020 and 6/5/2020 by Mr. Panke for Requested Relief that seems to be getting passed over for Remedy?

I also ask that Central Office take into consideration the NEW Memorandum from Chief Executive Officers Andre Matevosian Acting Ass. Director Correctional Programs Division, Hugh J. Hurwitz Ass. Director Reentry Service Division 4/22/2020 and June 2020. Subject: Home- Confinement that has apparently been Revised twice since Mr. Panke has been Filing. Captain Hacker, Terminal Island California stated 7/1/2020 Town Hall K-unit Building that the Memorandum has been Revised again. I would also like to bring to light/attention United States v. Fischman, 4:16-cr-00246-HSG that was from here at Terminal Island that was given Compassionate Release. I do appreciate your time in this matter in my behalf. Thank You for your time also.

Sincerely &amp; Respectfully

Charles B. Panke

Charles BERNARD Panke

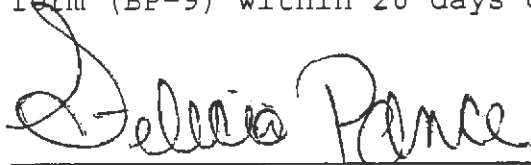
**Response to Inmate Request to Staff**

PARKE, CHARLES BERNARD  
Reg. No. 10211-046

This is in response to your request for compassionate release based on concerns about your medical circumstances. After careful consideration, your request is denied.

A thorough review of your request was completed. Utilizing Program Statement 5050.50, Compassionate Release/Reduction in Sentence: Procedures for Implementation of 18 U.S.C. 3582(c)(1)(A) and 4205(g), dated January 17, 2019, it has been determined that you are not eligible for a compassionate release, "Request Based on Medical Circumstances, Debilitated Medical Condition." While your medical records show you have a medical condition, further evaluation indicates you are independent with all activities of daily living (ADLs) and instrumental ADLs. In addition, you are independently mobile and are capable of carrying on self-care.

If you are not satisfied with this response to your request, you may commence an appeal of this decision via the administrative remedy process by submitting your concerns on the appropriate form (BP-9) within 20 days of the receipt of this response.



Felicia Ponce, Warden



Date